Case 15-01081 Doc 1 Filed 01/14/15 Entered 01/14/15 14:53:48 Desc Main

B4 (Official Form 1) (04/13)	Docur		Page 1	UI 32		aled to be seen to be seen	00000000000000000000000000000000000000	999 ( 5 %) - 2 % - 2 %
Limited States Bankriopi						ZYOLUN	TARVPECII	ION
Northern District of I	Hinois							
Name of Dobtor (if individual, enter Last, Pirst, Middle): Sing, Miriam			Name of Joint Debter (Spouse) (Last, Pirst, Middle):					
All Other Names used by the Dehter in the last 8 years (include married, maiden, and leads names):			All Other Names used by the Joint Deblor in the last 8 years (include matried, praiders, and trade names):					
None			Last four digits of Sec. Sec. or individual-Pexpayer I.D. (ITIN)/Complete EIN					
Last four digits of Soc. Sec. or Individual-Taxpayer I.D. (ITIN (if more than one, state all): 2801.	EIN	(if more than	n one, stat	le ali):				
Street Address of Deblor (No. and Street, City, and State):			Street Addn	sss of Join	u Debter (i	No. and Street	i, City, and State	e);
7812 South Maryland Avenue			1					
Chicago, Illinois	ZIP CODE	enero I					<u> Zi</u>	PCODE
County of Residence or of the Principal Pface of Business:		TRACTOR 1	County of P	lesidence:	or of the P	rincipal Place		
COOK Mariting Address of Dobtor (if different from street address):		•	Mailing Ad	dress of Jo	sint Debtor	r (if different i	frum street adde	essi):
Same								
								1 (1/2)
ZIP CODE  Location of Principal Assets of Business Debtor (if different from street address above):					P CODE			
Same								
Type of thebtor (Porm of Organization) (Check one lox.)	(Check o	Nature of me box.)	Rosiness		c		nkruptey Code is Filed (Chec	
• • • • • • • • • • • • • • • • • • • •		caith Case Buss		Total in		hapter 7 hapter 9		er 15 Polition for mitim of a Foreign
M Individual (includes Joint Dobtors)  See Exhibit D on page 2 of this form.	11	ngle Asset Ros LU,S.C. § 101(		ARISO DE	<u>⊡</u> : ci	hapter [ ]	Muin	Proceeding
Corporation (includes LLC and LLP) Partnership Other (If debter is not one of the above entities, check		eifread ookbruker				haptor t2 haptor t3	Recog	er 15 Patition for mition of a Possign
Collect (If debter is not one of the above entitles, check	🛅 😘	ommodity Brok learing Bank	er			-		ain Proceeding
this box and elate type of entity below.)		ther				<del></del>	Vandan de la Strante de	
Chapter 15 Debtors Country of debtor's center of main interests:		Tax-Excit (Check box, it	pt Entity (applicable.)			•	Sature of Debis Check one box	)
Cooleity of decitor a certical of misurmateresis:	_	,	exempt organization debts, defined in H U.S.C. primarity			Delets are grimarity		
Buch country in which a foreign proceeding by, regarding, or	un	ider title 26 of t	The United States § 104(8) as "incurred by an business debts.  in Revenue Code), individual primarily for a					
against delder is ponding:	C0	odo fillo suscina	n Kevenne Co	ao).	ткаг	onal, family,	01	
Falling Fee (Check one box.)	1		1		1	sekold purpos Chanter I i D		
1_			Check one	hox:		•	üned in 11 U.S.	C & MICSIDA
Full Filing Fee attached.  Filing Fee to be paid in installments (applicable to indiv	idisələ nalvi	). Must attech	Debta	or is not a	an consinues small busi	adsa qojstas az Pridesku az dei	i defined in 11 U	J.S.C. § 101(51D)
signed application for the court's consideration certifyin unable to pay the except in installments. Rule 1006(b).	g (hat the di	lebtor is	Check IC ☐ Debu	ព្រះនៃ ព្រះមក្រា	gale ponca	ntingent Koni	dated debts (exc	chiding debts owed to
			inside	ers or affil	liates) as <b>o</b> l	ess than \$2,49	90,925 (атоын	subject to adjustment
Filing Fee waiver requested (applicable to chapter 7 indi- ultach signed application for the court's consideration.	reidnats only See Official	iy). Must Form 3B.				e years thereo	gier j.	
			Check all a			this petition		
			Acce	nunces of	ľtho plan v	vore sofficiled.	prepatition from	one or more classes
Statistical/Administrative Information			1 of the	satiors, hij	<u>gecoordans</u>	e with 11 U.S	.C. § 1126(b).	THIS SPACE IS FOR
	gtrijogtion (e	s unsecuved cre	ditors.					COURT USE UNLY
Debtor estimates that, ofter any exempt property is distribution to unsecured creditors.	excluded or	and administrati	ve expenses o	ald, <b>there</b>	will be no	funds avnikab	le for	
Estimated Number of Creditors					Ε	3	□	
1-49 50-99 100-199 200-999 1,000	- 5,0	,00t- 1	-100,01	25,001-	56	-100£ 00,000	Over 100,000	
5,000		0,000 2	25,000	\$0,000			100/a(20)	
Estimated Assets					C	]		
\$0 to \$50,601 to \$100,001 to \$500,001 \$1,00	9,00 SI	10,090,001 1	59,000,001 o \$100	\$160,000 to \$500	0,001 📑 🕏	500,000,601 \$1 billion	More than \$4 Edition	
million million			nillion	million		p years with		
Estimated Liabifaties	Ē	<b>7</b> 1			ī	]		
\$0 to \$50,001 to \$100,001 to \$500,001 \$1,00	0,001 \$1	10,000,001 3	100,000,001	\$100,000	0,001 5:	500,000,001 51 billion	More than \$1 billion	
\$50,000 \$100,000 \$500,000 to \$1 to \$10 million million			e \$199 million	to \$500 milion		) -5 E (JII III (D))	o considis	

Case 15-01081 Doc 1 Filed 01/14/15 Entered 01/14/15 14:53:48 Desc Main

31 (Official Poem 1	) (04/(3) DOCUMENT	Paye 2 01 32	Page 2		
Voluntary Pelitic	o))	Name of Debter(s): Miriam Sing			
(This page must b	e completed and filed in every case.}				
	All Prior Benkrupley Cases Elled Within Last 8	Case Number:	Date Filed:		
Location No Where Fibre:	one	Grad Thistote,			
Location		Case Number:	Date Fifed:		
Where Filipl:	77	Site	ulilicanal algest X		
	Pending Bankrapicy Case Filed by any Spouse, Partner, or Aft	Case Number:	Date Filed:		
Nanso of Debtor:	None	Clear Manager.			
District:		Relationship:	Judge:		
16O) with the Se	Exhibit A  d if debtar is required to file periodic reports (e.g., forms 10K and counties and Exchange Commission pursuant to Section 13 or 15(d) Exchange Act of 1934 and is requesting relief under chapter 11.)	Exhibit  (To be completed if deba  whose debas are primaril)  I, the afterney for the politioner named in the informed the petitioner that [ire/6] she] may	er is en individual consumer debts.) feregoing polition, declare that I have proceed ander chapter 7, 11, 12, or 43		
☐ Pahibit A	is attacked and made a part of this potition.	of little 11, 12ftled States Code, and have ex- such chapter / I further certify that I have get by 11 U.S.d. § 342(b). X Signature of Attorney for Debtor(s)	olained the relief available under each vered to the debtor the notice required 01/14/2015		
	Exhib	NE C			
Dges the debtor o	own or have pessession of any property that poses or is alleged to pose	e threat of imminent and identifiable harm to pr	ublic health or safety?		
Yes, and B	noitieq each to part of this pethod and made a part of this				
Ð No.	☑ No.				
l <del></del> .					
tfuhls is a joint p	completed and signed by the debear, is attached and made a part of this spittion:  also completed and signed by the joint debter, is attached and made a				
	Information Regardin	and the Balaton - Warren			
<u> Z</u>	(Chee's any ap Debtor has been domicifed or has had a residence, principal place proceding the date of this petition or for a longer part of such 180 da	plicable box.) ef business, or principal assets in this Distric	t for 180 days insutediately		
	There is a bankruptcy case concerning debtor's affiliate, general par	lust, or partnership pending in this District.			
	Dehtor is a debtor in a foreign proceeding and has its principal place no principal glace of business or assets in the United States but is District, or the interests of the parties will be served in regard to the	e of business or principal assets in the United S a defendant in an action or proceeding (in a fi	States in this District, or hus oderal or state court) in this		
	Certification by a Debtor Who Reside (Check all appl	s as a Tenant of Residential Property licable boxes.)			
	Lundford has a judgment against the debtor for pessession of deb	tor's residence. (If two checked, complete the	following.)		
		(Name of landlord that obtained judgment)			
		•			
ļ		(Address of landlord)			
	Orbito: chains that under applicable neubankruptcy law, there are outile munetary default that gave rise to the judgment for presess	e of reumstances under which the deleter would t	e permitted to cure the red, and		
	Debter has included with this potition the deposit with the court of the petition.	of any rent that would become due during the 30	-day period after the filing		
	Debtor certifies that ha/she has served the Landford with this cort	Debtor certifies that he/she has served the Landford with this confidention. (11 U.S.C. § 362(1)).			

Case 15-01081 Doc 1 Filed 01/14/15 Entered 01/14/15 14:53:48 Desc Main

Document Page 3 of 32 Page 3 B1 (Official Form 1) (04/43) Name of Delitor(s): Voluntary Petition Midam Sing filits page must be completed and filed in every case J Signatures Signature of a Foreign Representative Signature(s) of Debtor(s) (Individual/Joint) I declare under penalty of perjury that the information provided in this petition is true f declare under penalty of perjury that the information provided in this petition is true and correct, that I am the foreign representative of a debtor in a foreign proceeding, and correct. and that I am authorized to file this petition. III petitioner is an individual whose debts are primarily consumer debts and has chosen to file under chapter 7]. I am aware that I may proceed under chapter 7, 11, 12 (Circk only one bax.) or 13 of title 11, United States Code, understand the relief available under each such chapter, and choose to proceed under chapter 7. I request relief in accordance with chapter 15 of title 11, United States Code. [17 no attorney represents me and no bankraptey position preparer signs the position] [ Certified copies of the documents required by 11 U.S.C. § 1515 are attached have obtained and read the natice required by F1 U.S.C. § 342(b). Pursuant to 14 U.S.C. § 1511, I request relief in accordance with the I request relief in accordance with the chapter of title 1). United States Code, specified was petition. chapter of title 11 specified in this polition. A certified copy of the order greating recognition of the foreign main proceeding is attached Х х (Signature of Foseign Representative) Signature of Debtor х (Printed Name of Poreign Representative) Signature of Joint Deland Telephone Number (if not represented by attorney) 01/14/2015 Date Date Signature of Non-Attorney Bankruptcy Petition Preparer Litarahy dynature of I declare under penalty of perjury that: (1) I am a bankruptcy polition preparer as x defined in 14 U.S.C. § 110, (2) I prepared this document for compensation and have Signature of Attorney for Debto den Michelle Richardson Automey for Debtor(s) provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. §§ 110(b), 110(b), and 342(b); and, (3) if rules or Printed Name of Attorney for Debter(s) Attorney At Law guidelines have been promutgated pursuant to 11 U.S.C. § !10(a) setting a maximum (Se for survices chargeable by bankruptcy putition preparers, I have given the debter Firm Nestes notice of the maximum amount before propering any document for fifing for a debter 332 South Michigan Avenue, Sulle 1032-J397' ... or excepting any too from the debtor, as required in that section. Official Form 19 is Chicago, lithois 60604 ausched. Address 708.623.3<u>224</u> Printed Name and title, if any, of Bankruptcy Petition Preparer Tetephone Nanmer 01/14/2015 Social-Security number (If the bankrupicy petition preparer is not an individual, In a case in which § 707(b)(4)(D) applies, this signature also constitutes  $\epsilon$ state the Social-Scourity number of the officer, principal, responsible person or certification that the attnoney has no knowledge after an inquiry that the information partner of the bankruptoy polition preparer.) (Required by 11 U.S.C. § 110.) in the schedules is incorrect. Signature of Debtor (Corporation/Partnership) Edeclare under ponalty of perjusy that the information provided in this polition is true Address and correct, and that I have been authorized to file this petition on behalf of the The delater requests the relief in accordance with the chapter of title 11, United States Signature Code, specified in this polition. Signature of Authorized Individual Signature of bankenploy polition preparer or officer, principal, responsible person, or Printed Name of Authorized Individual partner whose Social-Security number is provided above. Title of Authorized hidividual Names and Social-Security numbers of all other individuals who prepared or assisted in preparing this document unless the bankruptcy petition preparer is not as Date individual. If more than one person prepared this document, attach additional sheets conforming to the appropriate official form for each person. A bankruptcy petition preparer's failure to comply with the provisions of title 11 and

the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or

both 11 U.S.C. § 110; 18 U.S.C. § 156.

B 1D (Official Form 1, Exhibit D) (12/09)

#### UNITED STATES BANKRUPTCY COURT

Northern District of Illinois

In re	Miriam Sing	Case No.	
	Deblor	_	(if known)

# EXHIBIT D - INDIVIDUAL DEBTOR'S STATEMENT OF COMPLIANCE WITH CREDIT COUNSELING REQUIREMENT

Warning: You must be able to check truthfully one of the five statements regarding credit counseling listed below. If you cannot do so, you are not eligible to file a bankruptcy case, and the court can dismiss any case you do file. If that happens, you will lose whatever filing fee you paid, and your creditors will be able to resume collection activities against you. If your case is dismissed and you file another bankruptcy case later, you may be required to pay a second filing fee and you may have to take extra steps to stop creditors' collection activities.

Every individual debtor must file this Exhibit D. If a joint petition is filed, each spouse must complete and file a separate Exhibit D. Check one of the five statements below and attach any documents as directed.

- It. Within the 180 days before the filing of my bankruptcy case, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, and I have a certificate from the agency describing the services provided to me. Attach a copy of the certificate and a copy of any debt repayment plan developed through the agency.
- © 2. Within the 180 days before the filing of my bankruptcy case, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, but I do not have a certificate from the agency describing the services provided to me. You must file a copy of a certificate from the agency describing the services provided to you and a copy of any debt repayment plan developed through the agency no later than 14 days after your bankruptcy case is filed.

13	10.4	(Official	Form 1.	Exh.	Diff	2/091 -	Cont.
13	101	CONTRACTOR	**VIIII **	LINE.	970		COLLEG

☐ 3. I certify that I requested credit counseling services from an approved agency but was unable to obtain the services during the seven days from the time I made my request, and the following exigent circumstances merit a temporary waiver of the credit counseling requirement so I can file my bankruptcy case now. [Summarize exigent circumstances here.]

Page 2

If your certification is satisfactory to the court, you must still obtain the credit connseling briefing within the first 30 days after you file your bankruptcy petition and promptly file a certificate from the agency that provided the counseling, together with a copy of any debt management plan developed through the agency. Failure to fulfill these requirements may result in dismissal of your case. Any extension of the 30-day deadline can be granted only for cause and is limited to a maximum of 15 days. Your case may also be dismissed if the court is not satisfied with your reasons for filing your bankruptcy case without first receiving a credit counseling briefing.

- ☐ 4. I am not required to receive a credit counseling briefing because of: [Check the applicable statement.] [Must be accompanied by a motion for determination by the court.]
  - Incapacity. (Defined in 11 U.S.C. § 109(h)(4) as impaired by reason of mental illness or mental deficiency so as to be incapable of realizing and making rational decisions with respect to financial responsibilities.);
  - ☐ Disability. (Defined in 11 U.S.C. § 109(h)(4) as physically impaired to the extent of being unable, after reasonable effort, to participate in a credit counseling briefing in person, by telephone, or through the Internet.);
    - ☐ Active military duty in a military combat zone.
- ☐ 5. The United States trustee or bankruptcy administrator has determined that the credit counseling requirement of 11 U.S.C. § 109(h) does not apply in this district.

I certify under possity of perjury that the information provided above is true and correct.

Signature of Debtor:

Date: 01/14/2015

## UNITED STATES BANKRUPTCY COURT

# NOTICE TO CONSUMER DEBTOR(S) UNDER §342(b) OF THE BANKRUPTCY CODE

In accordance with § 342(b) of the Bankruptcy Code, this notice to individuals with primarily consumer debts: (1) Describes briefly the services available from credit counseling services; (2) Describes briefly the purposes, benefits and costs of the four types of bankruptcy proceedings you may commence; and (3) Informs you about bankruptcy crimes and notifies you that the Attorney General may examine all information you supply in connection with a bankruptcy case.

You are cautioned that bankruptcy law is complicated and not easily described. Thus, you may wish to seek the advice of an attorney to learn of your rights and responsibilities should you decide to file a petition. Court employees cannot give you legal advice.

Notices from the bankruptcy court are sent to the mailing address you list on your bankruptcy petition. In order to ensure that you receive information about events concerning your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address. If you are filling a **joint case** (a single bankruptcy case for two individuals married to each other), and each spouse lists the same mailing address on the bankruptcy petition, you and your spouse will generally receive a single copy of each notice mailed from the bankruptcy court in a jointly-addressed envelope, unless you file a statement with the court requesting that each spouse receive a separate copy of all notices.

## 1. Services Available from Credit Counseling Agencies

With limited exceptions, § 109(h) of the Bankruptcy Code requires that all individual debtors who file for bankruptcy relief on or after October 17, 2005, receive a briefing that outlines the available opportunities for credit counseling and provides assistance in performing a budget analysis. The briefing must be given within 180 days before the bankruptcy filing. The briefing may be provided individually or in a group (including briefings conducted by telephone or on the Internet) and must be provided by a nonprofit budget and credit counseling agency approved by the United States trustee or bankruptcy administrator. The clerk of the bankruptcy court has a list that you may consult of the approved budget and credit counseling agencies. Each debtor in a joint case must complete the briefing.

In addition, after filing a bankruptcy case, an individual debtor generally must complete a financial management instructional course before he or she can receive a discharge. The clerk also has a list of approved financial management instructional courses. Each debtor in a joint case must complete the course.

## 2. The Four Chapters of the Bankruptev Code Available to Individual Consumer Debtors

Chapter 7: Liquidation (\$245 filling fee, \$46 administrative fee, \$15 trustee surcharge: Total fee \$306)
Chapter 7 is designed for debtors in financial difficulty who do not have the ability to pay their existing debts. Debtors whose debts are primarily consumer debts are subject to a "means test" designed to determine whether the case should be permitted to proceed under chapter 7. If your income is greater than the median income for your state of residence and family size, in some cases, the United States trustee (or bankruptcy administrator), the trustee, or creditors have the right to file a motion requesting that the court dismiss your case under § 707(b) of the Code. It is up to the court to decide whether the case should be dismissed.

Under chapter 7, you may claim certain of your property as exempt under governing law. A trustee may have the right to take possession of and sell the remaining property that is not exempt and use the sale proceeds to pay your creditors.

The purpose of filing a chapter 7 case is to obtain a discharge of your existing debts. If, however, you are found to have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny

Form B 201A, Notice to Consumer Debtor(s)

Page 2

your discharge and, if it does, the purpose for which you filed the bankruptcy petition will be defeated.

Even if you receive a general discharge, some particular debts are not discharged under the law. Therefore, you may still be responsible for most taxes and student loans; debts incurred to pay nondischargeable taxes; domestic support and property settlement obligations; most fines, penalties, forfeitures, and criminal restitution obligations; certain debts which are not properly listed in your bankruptcy papers; and debts for death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs. Also, if a creditor can prove that a debt arose from fraud, breach of fiduciary duty, or theft, or from a willful and malicious injury, the bankruptcy court may determine that the debt is not discharged.

### Chapter 13: Repayment of All or Part of the Debts of an Individual with Regular Income (\$235 filing fee, \$46 administrative fee: Total fee \$281)

Chapter 13 is designed for individuals with regular income who would like to pay all or part of their debts in installments over a period of time. You are only eligible for chapter 13 if your debts do not exceed certain dollar amounts set forth in the Bankruptcy Code.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, using your future earnings. The period allowed by the court to repay your debts may be three years or five years, depending upon your income and other factors. The court must approve your plan before it can take effect.

After completing the payments under your plan, your debts are generally discharged except for domestic support obligations; most student loans; certain taxes; most criminal fines and restitution obligations; certain debts which are not properly listed in your bankruptcy papers; certain debts for acts that caused death or personal injury; and certain long term secured obligations.

## Chapter 11: Reorganization (\$1,167 filing fee, \$46 administrative fee: Total fee \$1,213)

Chapter 11 is designed for the reorganization of a business but is also available to consumer debtors. Its provisions are quite complicated, and any decision by an individual to file a chapter 11 petition should be reviewed with an attorney.

Chapter 12: Family Farmer or Fisherman (\$200 filing fee, \$46 administrative fee: Total fee \$246) Chapter 12 is designed to permit family farmers and fishermen to repay their debts over a period of time from future earnings and is similar to chapter 13. The eligibility requirements are restrictive, limiting its use to those whose income arises primarily from a family-owned farm or commercial fishing operation.

## 3. Bankruptcy Crimes and Availability of Bankruptcy Papers to Law Enforcement Officials

A person who knowingly and fraudulently conceals assets or makes a false eath or statement under penalty of perjury, either orally or in writing, in connection with a bankruptcy case is subject to a fine, imprisonment, or both. All information supplied by a debtor in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the United States Trustee, the Office of the United States Attorney, and other components and employees of the Department of Justice.

WARNING: Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information regarding your creditors, assets, liabilities, income, expenses and general financial condition. Your bankruptcy case may be dismissed if this information is not filed with the court within the time deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court. The documents and the deadlines for filling them are listed on Form B200, which is posted at http://www.uscourts.gov/bkforus/bankruptcv\_forms.html#procedure.

Case 15-01081 Doc 1 Filed 01/14/15 Entered 01/14/15 14:53:48 Desc Main Document Page 8 of 32

B 6 Summary (Official Form 6 - Summary) (12/14)

### UNITED STATES BANKRUPTCY COURT

Northern District of Illinois

in re	Miriem Sing,	Case No
	Debtor	Chapter 7

#### SUMMARY OF SCHEDULES

indicate as to each schedulo whether that schedule is attached and state the number of pages in each. Report the totals from Schedules A, B, D, E, F, I, and I in the boxes provided. Add the amounts from Schedules A and B to determine the total amount of the debtor's assets. Add the amounts of all claims from Schedules D, F, and F to determine the total amount of the debtor's Habilities. Individual debtors also must complete the "Statistical Summary of Certain Liabilities and Related Data" if they file a case under chapter 7, 11, or 13.

NAME OF SCHEDULE	ATTACHED (YES/NO)	NO. OF SHEETS	ASSETS	LIABILITIES	OTHER
A - Real Property	yes	1	\$ 0.00		
B - Personal Property	yes	3	\$ 1,550.00		
C - Property Ctaimed as Exempt	yes	1			
D - Creditors Holding Secured Claims	yes	1		\$ 0.00	
E - Creditors Holding Unsecured Priority Claims (Total of Claims on Schedule F)	yes	3		\$ 0.00	
F - Creditors Holding Unsecured Nospriority Claims	yes	6		<sup>8</sup> 17,023.29	
G - Executory Contracts and Unexpired Lesses	yes	1	20 April 1		
II - Codebiors	yes	1		Martin Telephone Communication	
I - Current income of individual Debtor(s)	yes	2	Constant of the constant of th	A CONTROL OF THE CONT	<sup>\$</sup> 1,254.00
Conrent Expanditures of Individual     Debtors(s)	yes	3	A COLORED CO.	Control of the contro	s 1,305.00
1	TOTAL.	22	s 1,550.00	· · ·	

Case 15-01081 Doc 1 Filed 01/14/15 Entered 01/14/15 14:53:48 Desc Main Document Page 9 of 32

B & Summary (Official Form 6 - Summary) (12/14)

Debtor

In to Miriem Sing

#### UNITED STATES BANKRUPTCY COURT

Northern District of Illinois

Case No. \_\_\_\_\_

Chapter 7

## STATISTICAL SUMMARY OF CERTAIN LIABILITIES AND RELATED DATA (28 U.S.C. § 159)

If you are an individual debtor whose debts are primarily consumer debts, as defined in § 101(8) of the Bankruptcy Code (11 U.S.C. § 101(8)), filing a case under chapter 7, 11 or 13, you must report all information requested below.

☐ Check this box if you are an individual debtor whose debts are NOT primarily consumer debts. You are not required to report any information here.

This information is for statistical purposes only under 28 U.S.C. § 159.

Summarize the following types of liabilities, as reported in the Schedules, and total them.

Type of Liability	Amou	nt
Dunestic Support Obligations (from Schedule B)	\$	0.00
Taxes and Certain Other Debts Owed to Governmental Units (from Schedule E)	\$	0.00
Claims for Death or Personal Injury White Debtor Was Intoxicated (from Schedule E) (whether disputed or undisputed)	\$	0.00
Student Lose Obligations (from Schedule F)	s	0.00
Domestic Support, Separation Agreement, and Divorce Decree Obligations Not Reported on Schedule E	\$	0.00
Obligations to Pension or Profit-Sharing, and Other Similar Obligations (from Schedule F)	\$	00,0
TOTAL	\$	0.00

 State the following:
 \$ 1,254.00

 Average Income (from Schedule I, Line 12)
 \$ 1,254.00

 Average Expenses (from Schedule J, Line 22)
 \$ 1,305.00

 Correct Monthly Income (from Form 22A-1 Line 11; OR, Form 22B Line 14; OR, Form 22C-1 Line 14)
 \$ 15,048.00

State the following:

tate the tomowing:		
Total from Schedule D, "UNSECURED PORTION, IF ANY" column		\$ 0.00
2. Total from Schedule F, "AMOUNT ENTITEED TO PRIORITY" column.	\$ 0.00	
3. Total from Schedule F, "AMOUNT NOT ENTITLED TO PRIORITY, IP ANY" column		\$ 0,00
4. Total from Schedule F		\$ 17,023.29
5. Total of non-priority unscentred debt (sum of 1, 3, and 4)		\$ 17,023.29

## Case 15-01081 Doc 1 Filed 01/14/15 Entered 01/14/15 14:53:48 Desc Main Document Page 10 of 32

86.4 (Official Form 6A) (12/97)	·
In re Mirlam Sing,	Case No.
i)ahfor	(§Cknown)

#### SCHEDULE A - REAL PROPERTY

Except as directed below, fist all real property in which the debtor has any legal, equitable, or future interest, including all property owned as a co-tenant, community property, or in which the debtor has a life estate. Include any property in which the debtor holds rights and powers exercisable for the debtor's own benefit. If the debtor is married, state whether the husband, wife, both, or the marital community own the property by placing an "H," "W," "L" or "C" in the column labeled "Hasband, Wife, Joint, or Community." If the debtor holds no interest in real property, write "None" under "Description and Location of Property."

Do not include interests in executory contracts and unexpired leaves on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leaves.

If an entity claims to have a tien or hold a secured interest in any property, state the amount of the secured claim. See Schedule D. If no entity claims to hold a secured interest in the property, write "None" in the column labeled "Amount of Secured Claim."

If the debter is an individual or if a joint polition is filled, state the amount of any exemption claimed in the property only in Schedule C - Property Claimed as Exempt.

DESCRIPTION AND LOCATION OF PROPERTY	nature of Debior's Interest in Property	HUSBAKD, WIFE, JOINT, OR COHONINETY	CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY, WITHOUT DEBUCTING ANY SECURED CLAIM OR EXEMPTION	AMOUNT OF SECURED CLAIM
None				
		i darah		
	1111 (111 (111 141 141 141 141 141 141 1			
	The state of the s	All Consultations of the Consultation of the C		
A STATE OF THE STA		ial>	0.00	

(Report also on Summary of Schedules.)

Case 15-01081 Doc 1 Filed 01/14/15 Entered 01/14/15 14:53:48 Desc Main Document Page 11 of 32

B 6B (Official Form 6B) (12/07)

10 20	Mirlam Sing	Case No.	
40.46	Debtor	 (If knows)	

#### SCHEDULE B - PERSONAL PROPERTY

Except as directed below, list all personal property of the debtor of whatever kind. If the debtor has no property in one or more of the categories, place as "x" in the appropriate position in the column labeled "None." If additional space is needed in any category, attach a separate sheet properly identified with the case name, case number, and the number of the extegory. If the debtor is married, state whether the hosband, wife, both, or the married community own the property by placing an "H," "W," "I," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor is an individual or a joint potition is filed, state the amount of any exemptions claimed only in Schedule C - Property Claimed as Exempt.

Do not list interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If the property is being held for the debtor by someone else, state that person's name and address under "Description and Location of Property." If the property is being held for a minor child, simply state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. Sec. 11 U.S.C. § 112 and Fed. R. Bankr. P. 1007(m).

TYPE OF PROPERTY	N O N E	DESCRIPTION AND LOCATION OF PROPERTY	NUSSAND, WITE, TOHKT, OR COPPARINTY	CURRENT VACUE OF DESTOR'S INTEREST IN PROPERTY, WITH- OUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION
Cash on hand.	х			
<ol> <li>Chocking, savings or other finan- cial accounts, certificates of deposit or shares in bunks, savings and foen, thrift, building and form, and home- stead associations, or credit unions, brokerage houses, or cooperatives.</li> </ol>		2. Checking Account Chase Bank	7010 7010 1000 1000 1000 1000 1000 1000	50:90
<ol> <li>Security deposits with public atil- ities, telephono companies, land- tords, and others.</li> </ol>	х			
<ol> <li>Household goods and furnishings, including audio, video, and computer equipment.</li> </ol>		4. Household goods, türnitüre, furnişifings		1,000.00
<ol> <li>Books; pictures and other art objects; antiques; stamp, coin, record, tage, compact disc, and other enflections or collectibles.</li> </ol>	×			
6. Wenring apparet.	radiode (g Gelegie (g Gelegie (g Gelegie (g	6F Wearing Apperal	: C.	500.00
7. Fors and jewelty.	х			
8. Firearms and sports, photo- graphic, and other hebby equipment.	National Control of the Control of t	Comment of		
Interests in insurance policies.     Name insurance company of each policy and itemize surrender or refined value of each.	x			eri i Sili i i i i i i i i i i i i i i i i
10, Annatitles. Itemize and nume each issuer.				
11. Interests in an education IRA as defined in 26 U.S.C. § 530(b)(1) or under a qualified State mitties plan as defined in 26 U.S.C. § 529(b)(1). Give particulars. (File separately the record(s) of any such interest(s). 11 U.S.C. § 521(e).)	×			

Case 15-01081 Doc 1 Filed 01/14/15 Entered 01/14/15 14:53:48 Desc Main Document Page 12 of 32

R 6B (Official Form 6B) (12/07) -- Cont.

In re Miriam Sing		Case No.	
Debter	· · · · · · · · · · · · · · · · · · ·	(If known)	

### SCHEDULE B - PERSONAL PROPERTY

(Continuation Sheet)

TYPE OF PROPERTY	N O N E	DESCRIPTION AND LOCATION OF PROPERTY	HUSSAND, WITE, JOURT, OR COMPUNITY	CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY, WITH-OUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION
12. Enterosts in IRA, ERISA, Keegh, or effect pension of profit sharing plans.  Give particulars.	к			memora e de la
13. Stock and interests in incorporated and unincorporated businesses. Itemize.				
<ol> <li>Interests in partnerships or joint ventures. Hemize.</li> </ol>	х			
15. Government and corporate bonds and other negotiable and non-aegotiable instruments.	is Sa			
16. Accounts receivable.	X	And the state of t		
17. Alimony, multitenance, support, and property softicments to which the debtur is or may be outified. Give particulum.				
18. Other liquidated debts owed to debtor lucfuding tax refuteds. Give particulars.	х			
19. Equitable or future interests, life estates, and rights or powers exercisable for the benefit of the debter other than those listed in Schedule A Real Property.				
20. Contingent and noncontingent interests in esule of a decedent, death benefit plan, his insurance policy, or trust.	X	COMPANY AND THE ORIGINATION AND AND AND AND AND AND AND AND AND AN	:	1 1 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4
21. Other contingent and unliquidated claims of every nature, including tax refunds, counterclaims of the debtor, and rights to scioff claims. Give estimated value of each.	<b>X</b>	Company of the compan		Control of the contro

Case 15-01081 Doc 1

B 6B (Official Form 6B) (12007) -- Cost.

la re	Mirlam Sing	. Case No	
JII 16	Debtor	(If known)	

# SCHEDULE B - PERSONAL PROPERTY (Construction Street)

TYPE OF PROPERTY	N O N R	DESCRIPTION AND LOCATION OF PROPERTY	MUSELNO, WIPE, 10PAT, OR COMMUNITY	CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY, WITH- OUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION
22. Patents, copyrights, and other intellectual property. Give particulars.	х			
23, Licenses, franchises, and other general intengibles. Give particulars.	×			
24. Customor lists or other compilations containing personally identifiable information (as defined in 14 U.S.C. § 101(41A)) provided to the debtar by individuals in connection with obtaining a product or service from the debtar primarily for personal, family, or household purposes.	×	<u>luga di Militari di Kabupatan 1994, ang Pa</u>		TO THE PROPERTY OF THE PARTY OF
25. Automobiles, trucks, truiters, and other vehicles and accessories.	100 A			
26, Boars, motors, and appeaseries.	X		100	[PANA A CALLED CONTRACT CONTRA
27. Aircraft and accessories.	L.x			
28. Office equipment, fornishings, and supplies.	×	<u> </u>		
29. Machinery, fixtures, equipment, and supplies used in business.	<b>x</b> .			
30. Inventory:	, ×	Andrew Colonia		10 a.a. 10 a.a. 10 a.a. 100 a.a. 100 a.a.
3t. Animals.	200 X	And the state of t		
32. Cropx - growing or harvested. Give perticulars.	x			
33. Farming equipment and implements.	- 1000000 - 1000000000000000000000000000		2 (1.00) (0.00) (0.00)	
34. Pants supplies, chemicals, and feed.	×		، بدنواه	APARTONISCONSTANT
35. Other personal property of any kind not already listed. Hemize.	×			
		O continuation sheets attached Tot	<b>d≯</b>	\$ 1,550.00

(include amounts from any configuration shoots attached. Report total also on Summary of Schedules.)

Case 15-01081	Doc 1		Entered 01/14/15 14:53:48	Desc Mair
B6C (Official Factor 6C) (04/13)		Document	Page 14 of 32	

in re Minam Sing		Case No.
Debtor	,	(If known)

## SCHEDULE C - PROPERTY CLAIMED AS EXEMPT

Debtor claims (he exemptions to which debtor is entitled under: (Check one box)  11 U.S.C. § 522(b)(2)  21 11 U.S.C. § 522(b)(3)	<ul> <li>Check if debtor claims a homestoad exemption that exceed \$155,675.*</li> </ul>
--	--

DESCRIPTION OF PROPERTY	SPECIFY LAW PROVIDING LACH EXEMPTION	VALUE OF CLAIMED EXEMPTION	CURRENT VALUE OF PROPERTY WITHOUT DEDUCTING EXEMPTION		
Household Goods, Furniture, Furnishings	735 ILCS 5/12-1001 (b)	1,000.00	1,000.00		
Wearing Apparel	735 ILCS 5/12-1001 (a)	500.00	500.00		
Checking Account Balance	735 ILCS 5/12-1081 (b)	50.00	50.00		
	Para de la companya d				
	Section of the control of the contro				
	The second of th				

<sup>\*</sup> Amount subject to adjustment on 4/01/16, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

Case 15-01081 Doc 1 Filed 01/14/15 Entered 01/14/15 14:53:48 Desc Main Document Page 15 of 32

B 6D (Official Form 6D) (12/97)		
In re Mirlam Sing	. Case No.	
Debtor		(if known)

#### SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS

State the name, mailing address, including zip code, and had four digits of any account number of all entities bolding chims secured by property of the debtor as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. List creditors holding all types of secured interests such as judgment liens, gamishments, statutory liens, mortgages, deeds of trust, and other security interests.

List creditors in alphabetical order to the extent practicable. If a minor child is the creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doc, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Banks, P. 1007(m). If all secured creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H – Codebtors. If a joint petition is filled, state whether the bushand, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "L" or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Total the columns labeled "Amount of Claim Without Deducting Value of Collateral" and "Unsecured Portion, if Any" in the boxes labeled "Total(s)" on the last sheet of the completed schedule. Report the total from the column labeled "Amount of Claim Without Deducting Value of Collateral" also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report the total from the column labeled "Unsecured Portion, if Any" on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

 $\mathbf{Z}$ 

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE AND AN ACCOUNT NUMBER (See Instructions Above.)	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL	UNSECURED PORTION, IF ANY
ACCOUNT NO.		•						
			VALUE \$					
ACCOUNT NO.				-			· · · ·	
			VALUE \$					
ACCOUNT NO.	-							
O continuation sheets			VALUE \$ Subtotal >	1		<u> </u>	s	\$
gituched attents			(Total of this page)				0.00	0.00
			Total ► (Lise only on last page)				\$ 0.00	\$ 0.00
			. , .,				(Report also on Summary of Schedules.)	(If applicable, report also on Statistical Summary of Cortain Liabilities and Rotated Date.)

#### Case 15-01081 Filed 01/14/15 Entered 01/14/15 14:53:48 Desc Main Doc 1 Document Page 16 of 32

B6E (Official Form 6E) (04/13) In re Miriam Sing Case No. (if known) Debtor

#### SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

A complete list of claims entitled to priority, listed separately by type of priority, is to be set forth on the sheets provided. Only holders of unsecured claims entitled to priority should be listed in this schedule. In the boxes provided on the attached sheets, state the name, mailing address, including zip code, and last four digits of the account number, if any, of all entities holding priority claims against the debter or the property of the debtor, as of the date of the filing of the petition. Use a separate continuation sheet for each type of priority and label each with the type of priority.

The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian," Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Benkr. P. 1907(m).

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebior," include the entity on the appropriate schedule of creditors, and complete Schedule H-Codebtors. If a joint polition is filled, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column tobeled "I lushand, Wife, If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place on "X" in Joint, or Community." the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of claims listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all claims listed on this Schedule E in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules.

Report the total of amounts entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Date.

Report the total of amounts not entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all

amounts not entitled to priority listed on this Schedule B in the box labeled "Totals" on the tast sheet of the completed schedule. Individe with primarily consumer debts report this total also on the Statistical Sommary of Certain Liabilities and Related Data.	gal debtors
Check this box if debtor has no creditors holding unsecured priority claims to report on this Schedule E.	
TYPES OF PRIORITY CLAIMS (Check the appropriate box(es) below if claims in that category are listed on the attached sheets.)	
Domestic Support Obligations	
Claims for domestic support that are excel to or recoverable by a spouse, former spouse, or child of the debtor, or the parent, legal guresponsible relative of such a child, or a governmental unit to whom such a domestic support claim has been assigned to the extent provided U.S.C. § 507(a)(1).	iardian, or ded in
Extensions of credit in an involuntary case	
Claims arising in the ordinary course of the debtor's business or financial affairs after the commencement of the case but before the care appointment of a trustee or the order for relief. H U.S.C. § 507(a)(3).	tion of the
Wages, salaries, and commissions	
Wages, salaries, and commissions, including vacation, severance, and sick leave pay owing to employees and commissions owing to quindependent sales representatives up to \$12,475° per person camed within 180 days immediately preceding the filing of the original peticessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(4).  Contributions to employee benefit plans	ualifying tion, or th
	e a the a

Money owed to employee benefit plans for services rendered within 180 days immediately proceding the fitting of the original polition, or the essettion of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(5).

<sup>\*</sup> Amount subject to adjustment on 4/01/16, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

Case 15-01081 Doc 1 Filed 01/14/15 Entered 01/14/15 14:53:48 Desc Main Document Page 17 of 32

B6E (Official Form 6E) (04/13) - Cont.

In re Mirlam Sing , Case No	)
Certain farmers and fishermen  Chims of certain farmers and fishermen, up to \$6,150* per farmer or fisherman, against the debtor, as pro	ovided in 11 U.S.C. § 507(a)(6).
Upposits by individuals  Claims of individuals up to \$2,775* for deposits for the porchase, lease, or reutal of property or services that were not delivered or provided. 11 U.S.C. § 507(a)(7).	for personal, family, or household use,
Taxes and Certain Other Debts Owed to Governmental Units  Taxes, customs duties, and penalties owing to foderal, state, and local governmental units as set forth in 1	11 U.S.C. § 507(a)(8).
Commitments to Maintain the Capital of an Insured Repository Institution  Claims based on commitments to the FDIC, KTC, Director of the Office of Thrift Supervision, Compared Governors of the Federal Reserve System, or their predecessors or successors, to maintain the capital of an § 507 (a)(9).	llor of the Currency, or Board of Insured depository institution. It U.S.C
Claims for Death or Personal Injury White Debtor Was Intoxicated  Claims for death or personal injury resulting from the operation of a motor vehicle or vessel white the dedrug, or another substance. 11 U.S.C. § 507(a)(10).	blor was intoxicated from using alcohol,
* Amounts are subject to adjustment on 4/01/16, and every three years thereafter with respect to cases can adjustment.	nmenced on or after the date of

1 continuation sheets attached

Case 15-01081 Doc 1 Filed 01/14/15 Entered 01/14/15 14:53:48 Desc Main Document Page 18 of 32

136E (Official Form 6E) (04/13) - Cont.

In re	Miriam Sing		Case No	
		Debior		(if known)

## SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

(Continuation Sheet)

Type of Priority for Claims Listed on This Sheet

					<u> </u>		Ahe at a transfer the		
CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See Instructions above.)	CODEBTOR	GUSBAND, WEEL, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	GETUTED	AMOUNT OF CLAIM	AMOUNT ENTITLED TO PRIORITY	AMOUNT NOF ENTIFED TO PRIORITY, IF ANY
Account No.								***	
Account Na.	<u> </u>								
Account No.		:							
Account No.		:			_				
Shoet po. 10°ccftinguison_sheets nive	lised to Se	shadute of			Subtota	nic.	\$ 0.00	\$ 0.00	0.00
Creditors Holding Priority Claims			(Use only on last page of Schedule E. Report also of Schedules.)	Cotais o	of this p To upleted	uge) tol≯	\$ 0.00	0.00	
						sis≯ I		s 0,00	\$ 0.00

Case 15-01081 Doc 1 Filed 01/14/15 Entered 01/14/15 14:53:48 Desc Main Document Page 19 of 32

B 6F (Official Form 6F) (12/07)

n re Miriam Sing	,	Case No.	
Dektor		(if known)	

#### SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number, of all entities holding unsecured claims without priority against the debter or the property of the debter, as of the date of filling of the petition. The complete account number of any account the debter has with the creditor is useful to the trustee and the creditor and may be provided if the debter chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

If any onlity other than a spouse in a joint case may be jointly fiable on a claim, place an "X" in the column labeled "Codobtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codobtors. If a joint petition is filled, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in nonre than one of these three columns.)

Report the total of all claims listed on this schedule in the box labeled "Total" on the bast sheet of the completed schedule. Report this total also on the Summary of Schedules and, if the debtor is an individual with primarity consumer debts, report this total also on the Statistical Summary of Certain Liabilities and Related Data.

 Check this box if debtor has no creditors holding unsecured claims to report on this Schedule F. HUSBAND, WIFE, JOINT, OR COMMUNITY DATE CLAIM WAS AMOUNT OF CREDITOR'S NAME, UNLIQUIDATED CONTINGENT INCURRED AND CLAIM CODEBTOR MAILING ADDRESS DISPUTED CONSIDERATION FOR INCLUDING ZIP CODE, AND ACCOUNT NUMBER. CLAIM. (See instructions above) IF CLAIM IS SUBJECT TO SETOPP, SO STATE. ACCOUNT NO. 50007136694 uility billing, 2014 People's Gas 4.076.68 × P.O. Box 19100 Green Bay, Wisconsin 54307 ACCOUNT NO. 1763880953 utility billing, 2013 Pacofere Gae 704.00 X 4Cimilit Protection Assoc. 13356 Nort Road, Suite 2130 Dellas, Toxas, 75240 ACCOUNT NO. 27269968 medical billing, 2008 John H. Sengstacke 76.00 X Ambutatory Čara Center 600 East 51st Street Chicago, Il4nals 60816 ACCOUNT NO. 27308329 medical billing, 2008 John H. Sengstacke 30.00 х Ambulatory Care Center 500 East 51st Street Chicago, illinois 60615 Subtotal> \$ 4.886.68 continuation sheets attached (Use only on last page of the completed Schedule F.) (Report also on Summary of Schedules and, if applicable, on the Statistical Summery of Certain Liabilities and Related Data.)

Case 15-01081 Doc 1 Filed 01/14/15 Entered 01/14/15 14:53:48 Desc Main Document Page 20 of 32

B 6F (Official Form 6F) (12/07) - Cost.

to va	Mirlam Sing		Case No.	
SIF 10 _	Debt	)¥	(if known)	

# SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS (Continuedion Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See histructions above.)	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOPP, SO STATE.	CONTINGENT	UNLÍQUÍDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 27365337  John H. Songstacke Ambelatory Care Center 500 East 51st Street Chicago, fillinois 60615			medical billing, 2008		х		14.00
Capital One Bank P.O. Box 85617 Richmond, Virginia 23285		:	utility billing, 2009		x		772.00
ACCOUNT NO. 603220145185  SYNCB/Welmert P.O. Box 530927 Atlanta, Georgia 30353	į		credit account, 2012		x		378.00
ACCOUNT NO. 5045100362759  Cook County Health & Hospital 25706 Network Place Chicago, Illinois 60673			medical billing, 2014		х		9.46
ACCOUNT NO. 5329  Keshava Medical Center,Lfd. 2200 S. Main Street Lombard,Illinois 60148			medical billing, 2014	,	х		208.66
Sheet in. 1 of 5 continuation s to Schedule of Creditors Holding Unscenn Nonpriority Chaims		ached	<u></u>	<u> </u>	Sut	ototai>-	\$ 1,382.12
Total> (Use only on last page of the completed Schedule F.) (Report also on Summary of Schedules and, if applicable on the Statistical Summary of Certain Liabilities and Related Buts.)						\$	

Case 15-01081 Doc 1 Filed 01/14/15 Entered 01/14/15 14:53:48 Desc Main Document Page 21 of 32

B 6F (Official Four 6F) (12/07) - Cont.

ln re	Miriam Sing		Case No.
_	Debter	,	(if known)

# SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS (Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	HUSBAND, WIFE, JOENT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNCIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCORNT NO. Sing0000  Metropoliton Gastroenterology Cons. 10444 S. Westorn Avende Chicago, Elinois 60643			medical billing, 2013		х		100.58
ACCOUNT NO. 9203720  NCO Financial Systems P.O. Box 15270  Wilmington, Delaware 19850			credit account, 2013		x		25.27
Royal Furniture Co. P.O. Box 3784 Memphis, Tennessee 38173			credit account, 2006		х		490.22
ACCOUNT NO. Sinm1000  American Scientific Medical Lab 7006 North Western Avenue Chicago, illinois 60645			medical billing, 2006		x		20.00
ACCOUNT NO. 21516499  City of Chicago EMS %Areold Scott Harris PC 111 West Jackson Blvd., Ste. 600 Chicago, Ifinois 60604			medical billing, 2013		x		74,22
Sheet no. 2 of 5. continuation a to Schedule of Creditors Holding Unseem Nonpriority Chabus		ached	·	·	Sub	total ➤	\$ 710.29
Total➤ (Use only on last page of the completed Schedule F.) (Report also on Summary of Schedules and, if applicable on the Statistical Summary of Certain Liabilities and Related Data.)						\$	

Case 15-01081 Doc 1 Filed 01/14/15 Entered 01/14/15 14:53:48 Desc Main Document Page 22 of 32

B 6F (Official Form 6F) (12/07) - Cont.

In re	Mirlam Sing		Case No	
		Dahtar		(tf known)

### SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. C3485110  John Strager Hospitel  WPenn Credt  916 South 14th Strage Herdsburg, Ponnsylvania 17108			medical billing, 2013		×		124.38
ACCOUNT NO. 1472143  John Stroger Hospital  %Penn Credit 916 South 14th Street Hamisburg, Pennsylvania 17108			medical billing, 2014		x		207.02
ACCOUNT NO. 627645605303  Fingerhut/Web Bank SMidland Credit Management, Inc. 6875 Aero Drive, Suite 200 Son Diego, Celtionila 92128			credit account, 2009		x		3,508.26
ACCOUNT NO. 10092  The West Clinic, PC P.O. Box 240728 Memphis, Tennessee 38124			medical billing, 2006		x		406.00
ACCOUNT NO. 1380137  PMG Pathology Group of the MidSouth Trumbell Laboratories P.O. Box 1000, Oept. 639  Memphis, Tennessee, 38148			medical billing, 2006		x		1,348.00
Sheet no. 3 of 5 continuation state Schedole of Creditors Halding Unscense Nonpriority Claims		eched	,,,,	•	Sah	total>	s 5,593.66
Completed Schedule F.)  (Use only on last page of the completed Schedule F.)  (Report also on Summary of Schedules and, if applicable on the Statistical Summary of Certain Liabilities and Related Data.)							

Case 15-01081 Doc 1 Filed 01/14/15 Entered 01/14/15 14:53:48 Desc Main Document Page 23 of 32

B 6F (Official Ports 6F) (12/07) - Cont.

In re	Miriam Sing	,	Case No.	
	Debtor		_	(if known)

## SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS (Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (Sea instructions above.)	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM, IF CLAIM IS SUBJECT TO SETOFF, SO STATE,	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT No. 003579  Onco Diagnostic Laboratory P.O. Box 72501 Cleveland, Ohio 44192			medical billing, 2006		x		62.00
ACCOUNT NO. 362561823 Universal Collection Systems P.O. Box 751090 Memphis, Tennessee 38175			medical billing, 2006		x		165.34
ACCOUNT NO.4334694  Methodist Health Care P.O. Box 2279  Memphis, Tennessee 38101			medical billing, 2006		x		2,436.20
ACCOUNT NO. 4395560  Consolidated Recovery Systems, Inc. P.O. Box 1719 Meniphis, Tennessee 38101			medical billing, 2006		x		145.00
ACCOUNT NO. 31674520  T.M. Carr, MD 8010 Stage Hills Blvd. Memphis, Tennessee 38101			medical billing, 2006		х		220.00
Sheet no. 4 of 5 continuation sheets attached Subrotat> \$ to Settedates of Creditors Holding Unsecured Nonpriority Claims							\$ 3,028.54
Total>  (Use only on last page of the completed Schedule F.)  (Report also on Stramery of Schedules and, if applicable on the Statistical Summary of Certain Liabilities and Related Data )							

Case 15-01081 Doc 1 Filed 01/14/15 Entered 01/14/15 14:53:48 Desc Main Document Page 24 of 32

B 6F (Official Form 6F) (12/97) - Cort.

n re	Minam Sing		Case No
A11 1 D		Debtar	(if known)

## SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS (Continuation Sheet)

HUSBAND, WIFE, JOINT, OR COMMUNITY AMOUNT OF DATE CLAIM WAS CREDITOR'S NAME, CONTINGENT UNLIQUIDATED CODEBTOR DISPUTED CLAIM INCURRED AND MAILING ADDRESS CONSIDERATION FOR INCLUDING ZIP CODE, AND ACCOUNT NUMBER CLAIM. IF CLAIM IS SUBJECT TO (See instructions above.) SETOFF, SO STATE. ACCOUNT NO. 33172887 medical billing, 2006 Memphis Radiological PC 861.00 Х P.O.Box 34137 Bartlett, Tennessee 38184 ACCOUNT NO. medical billing, 2006 561.00 Memphis Radiological PC X P.O.Box 34137 Bartlett, Tennessee 38184 ACCOUNT NO. ACCOUNT NO. ACCOUNT NO. <u>5 ա 5</u> Subtotal≯ \$ continuation sheets attached Sheef co. to Schodule of Creditors Holding Unscoured 1,422.00 Nenpriority Claims 17,023.29 (Use only on last page of the completed Schedule F.) (Report also on Summary of Schedules and, if applicable on the Statistical Summary of Contain Linbilities and Related Data.)

Case 15-01081 Doc 1 Filed 01/14/15 Entered 01/14/15 14:53:48 Desc Main Document Page 25 of 32

B 6G (Official Fenn 6G) (12/07)		
In re_Mirlam Sing	 Case No	
Debtor	(if )	known)

### SCHEDULE G - EXECUTORY CONTRACTS AND UNEXPIRED LEASES

Describe all executory contracts of any nature and all unexpired leases of real or personal property. Include any timeshare interests. State nature of dobtor's interest in contract, i.e., "Purchaser," "Agent," etc. State whether definer is the lessor or tessee of a lease. Provide the names and complete mailing addresses of all other parties to each lease or contract described. If a minor child is a party to one of the leases or contracts, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 H.S.C. §112 and Fed, R. Banke, P. 1007(m).

Check this box if debtor has no executory contracts or unexpired leases.

NAME AND MAILING ADDRESS, INCLUDING ZIP CODE, OF OTHER PARTIES TO LEASE OR CONTRACT.	DESCRIPTION OF CONTRACT OR LEASE AND NATURE OF DESTOR'S INTEREST, STATE WHATHER LEASE IS FOR NONRESIDENTIAL REAL PROPERTY, STATE CONTRACT NUMBER OF ANY GOVERNMENT CONTRACT.
	i.

Case 15-01081 Doc 1 Filed 01/14/15 Entered 01/14/15 14:53:48 Desc Main Document Page 26 of 32

B 6H (Official Form 6H) (12/07)

[ភា ខេ	Miriam Sing,	Case No	
	Dehfor	(If known)	

#### SCHEDULE H - CODEBTORS

Provide the information requested concerning any person or entity, other than a spouse in a joint case, that is also liable on any debts listed by the debtor in the schedules of creditors. Include all guaranters and co-signers. If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaske, Arizona, California, Idaho, Louiviana, Newada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within the eight-year period immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state, commonwealth, or territory. Include all names used by the nondebtor spouse during the eight years immediately preceding the commencement of this case. If a minor child is a codebtor or a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doc, guardian." Do not disclose the child's name. See, 11 H.S.C. §112 and Fed. R. Banke, P. 1007(m).

Check this box if debter has no codebtors.

NAME AND ADDRESS OF CODEBTOR	NAME AND ADDRESS OF CREDITOR
Service of the servic	
Section (Control of Control of Co	The second secon

Fill in this In	formation to identify s	yotir case:						
	<b>M</b> idam		Sing					
Debtor 1	Relibre	Widdle Name	Last Name					
Debtor 2 (Spause, if filing)	Filest Nama	Radia Hame	Lest Nanco					
'	Benkruptcy Court for the:	Northern (Xatrict of illinois			1			
	senkreptcy Godit for uto.	HONORS (ASSERTED OF ALLESSEE				heck if thi	ie ier	
Case number (If known)	· · · · · · · · · · · · · · · · · · ·				_ i	ন ব	nded filling	
<u>i</u>			<del></del>		_ =	=	ement showing post-pe	atition
					•	chapter	13 income as of the fol	flowing date:
Official F	orm <u>B 6</u>					₩M/DD	TYYYY	
Sched	lule I: You	r Income						12/13
supplying cor if you are sep seperate shee	rect information, if yo arated and your spou	esible. If two married peons are married and not fill so is not filling with you, o top of any additional pagent	ng jointly, and you do not include info	ır spi amat	ouse is livir Ion about y	ig with yo	ou, include information a se. If more space is need	ibout your spouse ded, altach a
1. Fill in your	r employment	<del></del>	Debtor 1				Debtor 2 or non-filing	g spouso
i "	e mose than one job,		<u></u>					
	eperate page with nabout additional	Employment status	Employed				Employed	
employers.			Not employe	ed			Not employed	
self-amplo	•	Occupation	•			·		
Occupation or homema	n mey include student aker, if it applies.	·			•			
•		Employer's name						
2		Employer's address						
į			Number Street				Number Street	
1		•						
į			<del> </del>					
;			City	State	ziP Gode	<del></del>	City St	ale ZIP Code
		Mary large annularied than		Q:8K	7 216 COM	•	Oily 3	ale All COM
İ		How long employed the	re7				4	
Part 2:	Give Details About	Monthly Income						
	nonthly income as of less you are separated.	the date you file this form	n. If you have nothi	ng to i	report for an	ny fine, wri	te \$9 in the space. Include	your non-filing
If you or yo	our non-filing apolise ha	Ive more than one employe Jack a separate sheet to th		matic	on for a¶em	ployers fo	r that person on the lines	
					For Del	btor t	For Debtor 2 or non-filing spouse	
2. List more deduction	thly gross wages, sales), if not paid monthly,	ary, and commissions (be calculate what the monthly	ifore all payroll wage would be.	2.	\$	0.00	\$	
3. Estimate	and list monthly over	timo pay.		3.	†\$	0.00	+ \$	
4. Calculate	gross income. Add ¶	ne 2 + 11 ns 3.		4.	\$	0.00	\$	

## Case 15-01081 Doc 1 Filed 01/14/15 Entered 01/14/15 14:53:48 Desc Main Document Page 28 of 32

Sino Case number at looms Dobtor 3 Ukiki's Marne Ekel klams For Debter 1 For Debtor 2 or non-filling spouso 0.00List all payroll deductions: 0.005a. Tax, Medicaro, and Social Security deductions 5a. 0.00 5b. Mandatory contributions for retirement plans бb. 0.005c. Voluntary contributions for retirement plans 5c. 0.00 5rf. 5d. Required repayments of retirement fund loans 0.00 5а. Se. Insurance 0.005f. 5f. Domestic support obligations 00.05g. 5q. Union duos 0.00ßb. Sh. Other deductions. Specify: \_\_ 0.00 Add the payroil deductions. Add lines 5a + 5b + 5c + 5d + 5e +5f + 5g +5h. 0.00 Catculate total monthly take-frome pay. Subtract line 8 from tine 4. 7. Liet all other income regularly received: 8a. Not income from contai property and from operating a business, profession, or farm Attach a statement for each proporty and business showing gross receipts, ordinary and necessary business expenses, and the total 0.00 monthly not income. 0.008b. 6b, Interest and dividends 8c. Family support payments that you, a non-filling spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce 0.00settlement, and property settlement. Ø€. 0.008d. 8d. Unemployment compensation 1,087.00 8e. Se. Social Security 8f. Other government assistance that you regularly receive include cash assistance and the value (if known) of any non-cash assistance 167.00 that you receive, such as food stamps (bandits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: SNAP 81. 0.00ėа. åg. Pension or retirement income 0.008h. 8h. Other monthly Income. Specify: 1,254,00 Add alf other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g + 8h. 10. Calculate monthly income. Add line 7 + line 9. 1,254,00 0.00Add the extries in line 10 for Debter 1 and Debter 2 or non-filling spouse. 11. State all other regular contributions to the expenses that you list in Schodule J. include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. 0.00 11. **+** Specify: 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. 1,254.00 Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Date, if it applies Combined menthly income 13. Do you expect an increase or decrease within the year after you file this form? V No. Yes, Explain:

# Case 15-01081 Doc 1 Filed 01/14/15 Entered 01/14/15 14:53:48 Desc Main Document Page 29 of 32

Fill in this information to identify your case:		
Debtor 4 Mirlam Sing Field None Mode None Lest None	Check if this is:	
Debtor 2	An amended fil	Ina
(Spance, if \$king) Fine flams Widele Name Lest Name	, <u>—</u>	showing post-petition chapter 13
United States Sankruptcy Court for the: District of	expenses as of	the following date:
Case number	MM / DD / YYYY	_
In second		g for Debtor 2 because Debtor 2
Official Form B 6J	maintains a se	parate household
Schedule J: Your Expenses		12/13
Be as complete and accurate as possible, if two married people are fill information. If more space is needed, attach another sheet to this form (if known). Asswer every question.	ng togother, both are equalty responsi . On the top of any additional pages, w	bio fer supplying cossect wite your name and case number
Part 1: Describe Your Household		
1. Is this a joint case?		•
No. Ge to ling 2.		
Yes. Does Debtor 2 live in a separate household?		
No		
Yos. Debtor 2 must file a separate Schedule J.		
2. Do you have dependents? No	Dependent's relationship to	Dependent's Does dependent live
Do not that Debtor 1 and Yes. Fill out this information for Debtor 2.	Dobtor 1 or Debter 2	age with you?
Do not stale the dependents'		No Yes
names.		No.
		Yes
		No.
•		Yes
		: No
		Yes.
		No
·		Yes
Do your expenses include expenses of people other than		
yourself and your dependents? Yes		
Part 2: Estimate Your Ongoing Monthly Expenses		
Estimate your expenses as of your bankruptcy filing date unless you	no neine this form as a supplement in	a Chapter 19 cape to capert
expenses so of a date after the bankruptcy is filed, if this is a supplementable date.		
include expenses paid for with non-cash government assistance if you	ı know the value	engin benganja
of such assistance and have included it on Schodule I: Your income $\{0\}$	Official Form B 6L)	Your expenses
<ol> <li>The rental or home ownership expenses for your residence. Include any rent for the ground or lot.</li> </ol>	firet mortgege payments and 4.	\$850.00
If not included in line 4:		á ao
4a. Real estate taxos	48.	\$ 0.00
4b. Property, homeowner's, or ranter's insurance	4kc	\$
<ol> <li>Home maintenance, repair, and upkeep expenses</li> </ol>	. 4c.	s0.00_
4d. Homeowner's association or condominium dues	46.	\$0.00_

## Case 15-01081 Doc 1 Filed 01/14/15 Entered 01/14/15 14:53:48 Desc Main Document Page 30 of 32

:			Your expe	B115-08
5.	Additional mortgago payments for your residence, such as home equity loans	Б.	\$	0.00
: : a.	Utilities:			
. "	Se. Electricity, heat, natural gas	đa.	\$	100.00
:	sb. Water, sewar, garbage collection	80.	\$	0.00
	sc. Telephone, cell phone, Internet, satellite, and cable services	<b>%</b> €.	\$	0.00
	6d. Other, Spacify:	€d.	8	0.00
7.	Food and housekeeping supplies	7.	\$	300,00
; • B.	Childcare and children's education costs	6.	\$	0.00_
: g.	Ciothing, laundry, and dry cloaning	9.	\$	0.00
10.	Personal care products and services	10.	\$	20.00
t1.	Modical and dental exponses	11.	\$	35.00
12.	Transportation, include gas, maintenance, bus or train (are.		s	0.00
;	Do not include car payments.	12-	<b>-</b>	
į13.	Entertainment, clubs, recreation, newspapers, magazines, and books	13.	\$	
14.	Charitable contributions and religious donations	14.	\$	0.00.
16.	Insurance.  Do not include insurance deducted from your pay or included in lines 4 or 20.			
:	15e. Life Insurance	<b>1</b> \$a.	\$	0.00
	15b. Heafth insurance	15b.	\$	0.00
:	15c. Vehicle insurance	15c.	\$	0.00
	rad Officer insuzance. Specify:	16d.	3	0.00
16.	Taxes. Do not include faxes deducted from your pay or included in lines 4 or 20.  Specify:	18.	\$	0.00
17.	installment or loase payments:			
}	17a. Car payments for Vehicle 1	. 17a.	\$	0.00_
	17b. Car payments for Vehicle 2	17b.	\$	0.00
	17c. Other, Specify:	17e.	\$	0.00
	17d. Other Specify:	17d.	\$	0.00
18.	Your payments of allmony, maintenance, and support that you did not report as deducted from your pay on time $B$ , Schedule $I$ , Your income (Official Form $B$ 6i).	18.	\$	0.00
19.		19.	\$	0.00
	Specify:	12.	₽	0.00
20.	Other real property expenses not included in lines 4 or 5 of this form or an Schedule I: Your inc	ome.		
	20a. Mortgages on other property	20a.	\$	0.00
į	20b. Real estate texes	20Ь.		0.00
1	20c. Property, homeowner's, or renter's insurance	206.	\$	0.00
:	204. Maintenance, repair, and upkeep expenses	20d.		0.00
:	20e. Homeowner's association or condominium dues	2Dg.	\$	0.00

# Case 15-01081 Doc 1 Filed 01/14/15 Entered 01/14/15 14:53:48 Desc Main Document Page 31 of 32

Dabler	Miriam Cabbana	MSJska Flatina	Enst Name	Sing	Case comber (9	Ancern)	<del></del>	
			<b></b>					
21. <b>O</b> tl	her. Specify:					2t.	<b>+</b> ş	0.00
	ur monthly expe result is your ma	naes. Add fines 4 orthly expenses.	through 21.			<del>22</del> .	\$	1,305.00
23. Calc	ulate your mont	-					e	1,254.00
23a.	Copy line 12 (y	our combined inc	nthly incom <mark>a)</mark> fro	m Schedula I.		238.	₹	1,20-100
23Ь.	Сору усыт тог	illuly expenses fro	m (lne 22 above.			236.	\$	1,305.00
. 23c,	-	nonthly expenses our <i>monthly nel in</i> c	-	ly income.		23e.	\$	-51.00
For mor	example, do you tgage payment to	expect to finish pa increase or decr	aying for your car agse because of	nees within the year of loan within the year of a modification to line to	ms of your marigage?			-···
: : :	,				<u>-</u>			

Document

Case 15-01081 Doc 1 Filed 01/14/15 Entered 01/14/15 14:53:48 Desc Main Page 32 of 32

B6 Declaration (Official Perm 6 - Declaration) (12/07)

<sub>In re\_Miriam Sing</sub>

(if known)

DECLARATION CONCERNING DEBTOR'S SCHEDU	${f LES}$	SCHEDUL	DEBTOR'S:	CONCERNING	RATION	DECLAR
--	-----------	---------	-----------	------------	--------	--------

#### DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DERTOR

I declare under penalty of perjury that I have read to may knowledge, information, and belief.	site foregoing summary and schedules, consisting of 30 sheets, and that they are true and correct to the best o
	$\mathcal{M}_{i} = \mathcal{M}_{i}$
Date 01/14/2015	Signature: Debtor
Ditte	Signature:
	(Joing Delater, if pay  [Lif joint case, both springs sign,]
•••••	
DECLARATION AND SIGNATU	IRE OF NON-ATTORNEY BANKRUPTCY PETITION PREPARER (See 11 U.S.C. § 110)
the debtor with a copy of this document and the notices and promulgated parameters in \$110.S.C. § 110(h) setting a maxim	play gelition pressures as defined in 11 U.S.C. § 110; (2) I prepared this document for compensation and have provided inthrustion required under 11 U.S.C. §§ 110(b), [10(h) and 342(b); and, (3) if rules or guidelines have been must fee for services chargeable by bunkingtay petition preparers, I have given the debter unities of the maximum or or accepting any fee from the debter, as required by that section.
Printed or Typed Name and Title, if any, of Bunkruptey Petition Preparer	Social Security No. (Required by 11 U.S.C. § 110.)
If the bankruptey patition properer is not an individual, stat who signs this document.	to the name, title (if any), whirese, and social meaning manher of the officer, principal, responsible person, or partner
Address	
X Signature of Brinkruptsy Petition Preparer	 Date
Names and Social Security numbers of all other individuals	who propered or assisted in propering this document, unless the bankruptcy gestion proparer is not an includend:
lf mars than one person prepared this document, altach wh	bitional signed sheets conforming to the appropriate Official form for each person.
18 U.S.C. § 156.	irlans of title 11 and the Redeval Rules of Bunkrupicy Procedure may roudt in flace or imprisonment or bath. 11 U.S.C. § 110:
	LTY OF PERJURY ON BEHALF OF A CORPORATION OR PARTNERSHIP
I, the [time	e president or other officer or an authorized agent of the corporation or a member or an authorized agent of the
eartmenship } of the	[corporation or partnership] named as debtor in this case, declare under penalty of perjuny that I have  1.30 sheets (Total shown of singular varies plus 1), and that they are true and correct to the best of my
Pate	
	Signature:
·	[Print or type name of individual signing on behalf of debtor.]
	vorollon unus indicate pasition or relationship to debtor.}
eralm for waking a false statement or variosative property	erty: Fine of up to \$500,000 or imprisonment for up to 5 years or both. 18 U.S.C. §§ 152 and 357],